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[DSH Targeting for Children's and Teaching Hospitals]

**SUBSTITUTE AMENDMENT OFFERED BY MR. BILBRAY
TO AMENDMENT OFFERED BY MR. WAXMAN
TO THE MEDICAID RECONCILIATION PROVISIONS**

(Page & line nos. refer to Committee Print of 8/11/97,
MEDICAID.007)

Add at the end the following new section:

1 SEC. 3472. PROTECTING DSH PAYMENTS FOR THE CERTAIN

2 CHILDREN'S AND TEACHING HOSPITALS.

3 (a) ASSURING PRIORITY DSH PAYMENTS.—Section

4 1923 (42 U.S.C. 1396r-4) is amended—

5 (1) in subsection (a)—

6 (A) by redesignating paragraphs (3) and

7 (4) as paragraphs (4) and (5), and

8 (B) by inserting after paragraph (2) the

9 following new paragraph:

10 “(3) In order to be considered to have met such

11 requirement of section 1902(a)(13)(A) as of October

12 1, 1998, the State must submit to the Secretary by

13 not later than July 1, 1998, a State plan amend-

14 ment that assures that aggregate payment adjust-

15 ment levels for certain hospitals under this section

16 are consistent with the requirement of subsection

17 (h), effective for inpatient hospital services furnished

18 on or after October 1, 1998.” and

19 (2) by adding at the end the following:

20 “(h) ASSURING PRIORITY DSH PAYMENTS.—

THE PREVIOUS
SENTENCE SHALL
NOT APPLY TO A
STATE WITH A
STATE PLAN AS
DESCRIBED IN
SUBSECTION
(e)(1)(A).

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1 “(1) IN GENERAL.—The assurances under this
2 subsection are that the aggregate level of payment
3 adjustments under this section with respect to prior-
4 ity DSH hospitals for a fiscal year (beginning with
5 fiscal year 1999) is not less than the minimum level
6 specified in paragraph (3) for the fiscal year. The
7 Secretary shall establish guidelines under which a
8 State may hold harmless, for purposes of dispropor-
9 tionate share hospital payments, its childrens and
10 teaching hospitals based on fiscal year 1997 State
11 expenditures.

12 “(2) PRIORITY DSH HOSPITAL DEFINED.—For
13 purposes of this subsection, the term ‘priority DSH
14 hospital’ means a hospital that meets the require-
15 ments of subsection (d) to be a disproportionate
16 share hospital and that has a low-income utilization
17 rate (as defined in subsection (b)(3)) that exceeds
18 20 percent, that is not an institution for mental dis-
19 eases defined under section 1905(i), and that—

20 “(A) is a hospital that described in sub-
21 section (d)(2)(A)(i), or

22 “(B) operates four or more approved medi-
23 cal residency training programs.

24 “(3) MINIMUM PAYMENT LEVEL.—

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1 “(A) FISCAL YEAR 1999.—Subject to sub-
2 paragraph (D), the minimum payment level for
3 a State for fiscal year 1999 under this para-
4 graph is equal to the aggregate amount of dis-
5 proportionate share payment adjustments made
6 pursuant to subsection (c) in fiscal year 1995
7 to priority DSH hospitals in the State.

8 “(B) SUBSEQUENT YEARS.—Subject to
9 subparagraph (D), the minimum payment level
10 for a State for a subsequent year under this
11 paragraph is equal to the aggregate amount of
12 disproportionate share payment adjustments
13 made pursuant to subsection (c) in the previous
14 fiscal year to priority DSH hospitals in the
15 State, increased by the medicaid growth rate
16 for the fiscal year involved (as determined
17 under subparagraph (C)).

18 “(C) MEDICAID GROWTH RATE.—For pur-
19 poses of this paragraph, the Medicaid growth
20 rate for a fiscal year for a State is the percent-
21 age by which the total amount of expenditures
22 under the State plan for medical assistance
23 under this title in a fiscal year exceeds such ex-
24 penditures in the previous fiscal year.

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1 “(D) EXCEPTION.—In no case shall the
2 minimum payment level under this paragraph
3 for a State for a fiscal year exceed the DSH al-
4 lotment for the State for the fiscal year.